Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2007 calendar year, or tax year beginning 4/1/2007 , and ending 3/31/2008 C Name of organization D Employer identification number Check if applicable Please use IRS Address change CENTER FOR INDIVIDUAL RIGHTS 52-1600481 label or Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change print or type. Initial return 1233 20TH STREET, NW 300 (202) 833-8400 Specific 7IP + 4 State or country City or town F Accounting method: Termination Instructions Other (specify) Amended return WASHINGTON 20036 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable H and I are not applicable to section 527 organizations Application pending trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for affiliates? Website: www.cir-usa.org H(b) If "Yes," enter number of affiliates ▶ H(c) Are all affiliates included? ► X 501(c) (3) **(**(insert no) (If "No," attach a list. See instructions.) Organization type (check only one) H(d) Is this a separate return filed by an organization if the organization is not a 509(a)(3) supporting organization and its gross Check here receipts are normally not more than \$25,000 A return is not required, but if the organization chooses covered by a group ruling? to file a return, be sure to file a complete return Group Exemption Number > Check I if the organization is **not** required Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 to attach Sch B (Form 990, 990-EZ, or 990-PF) 2,445,775 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) Contributions, gifts, grants, and similar amounts received: a Contributions to donor advised funds . . . 1b **b** Direct public support (not included on line 1a). 990,459 c Indirect public support (not included on line 1a). 1c d Government contributions (grants) (not included on line 1a) e Total (add lines 1a through 1d) (cash \$ 990,459 noncash \$ 1e 990.459 Program service revenue including government fees and contracts (from Part VII, line 93) 2 197.739 3 Membership dues and assessments . Interest on savings and temporary cash investments . 4 146,892 Revenue CANNED 5 Dividends and interest from securities . . . **6 a** Gross rents 6b **b** Less: rental expenses . . c Net rental income or (loss) Subtract line 6b from line 6a . 6c 60,000 Other investment income (describe 7 8 a Gross amount from sales of assets other (A) Securities (B) Other than inventory 1.050.685 **8a b** Less: cost or other basis and sales expenses 1,050,923 8b 0 c Gain or (loss) (attach schedule) -238 8c 0 d Net gain or (loss). Combine line 8c, columns (A) and (B) 8d -238 Special events and activities (attach schedule) If any amount is from gaming, check here a Gross revenue (not including \$ contributions reported on line 1b) **b** Less: direct expenses other than fundraising expenses . . . 0 c Net income or (loss) from special events. Subtract line 9b from line 9a 9с 10 a Gross sales of inventory, less returns and allowances . . . 10a **b** Less: cost of goods sold 10c 0 c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a Other revenue (from Part VII, line 103) . . 0 11 1,394,852 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 13 Program services (from line 44, column (B)) 13 939,548 Management and general (from line 44, column (C)) 14 14 118.174 ഗ് 15 151,052 15 Fundraising (from line 44, column (D)) . . Ö 16 16 Payments to affiliates (attach schedule) . 1,208,774 17 Total expenses. Add lines 16 and 44, column (A) 17 Excess or (deficit) for the year. Subtract line 17 from line $12 \bigcap G \bigcap$ Assets 18 18 186,078 19 Net assets or fund balances at beginning of year (from line 73, column 19 2,867,285 20 Other changes in net assets or fund balances (attach explanation) . 20 6,555 Net 21 3,059,918 Net assets or fund balances at end of year. Combine lines 18, 19, and 20

Form 990 (2007)

(iii) the amount allocated to Management and general

Page 2 Part II All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) Statement of organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions) **Functional Expenses** Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising services and general 6b, 8b, 9b, 10b, or 16 of Part I. 22 a Grants paid from donor advised funds (attach schedule) \$ 0 noncash \$ 22a If this amount includes foreign grants, check here 22 b Other grants and allocations (attach schedule) \$ 0 noncash \$ If this amount includes foreign grants, check here 22b Specific assistance to individuals (attach 23 0 24 Benefits paid to or for members (attach schedule) 24 25 a Compensation of current officers, directors, 25a key employees, etc. listed in Part V-A . . . 397,415 286,783 49,170 61.462 **b** Compensation of former officers, directors, 25b key employees, etc. listed in Part V-B c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 25c 26 Salaries and wages of employees not included 1,391 on lines 25a, b, and c 26 179,948 174,808 3,749 27 Pension plan contributions not included on 27 lines 25a, b, and c 83,863 83,863 Employee benefits not included on lines 28 25a - 2728 50.328 50,328 29 Payroli taxes 32,819 29 32,819 30 30 Professional fundraising fees . . . Ol Accounting fees 31 31 16,104 16,104 16.850 490 32 Legal fees 17,340 33 Supplies 33 3,012 2,892 12<u>0</u> 34 34 Telephone 7,582 7,322 Postage and shipping . 35 35 17,402 5,668 2,800 8,934 36 36 277,860 277,860 37 Equipment rental and maintenance 37 0 9.808 38 Printing and publications . . 38 21.030l 1.797 9.425 39 39 13,200 13,195 40 Conferences, conventions, and meetings 40 41 41 n 42 Depreciation, depletion, etc. (attach schedule) 42 7,901 7,901 Other expenses not covered above (itemize): a See attached statement 43a 82,970 432,177 -416,078 66,871 43b 0 _____ 43c 0 0 0 43d 0 0 ol 0 o 0 43e 43f ol ol 43g Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 151,052 1,208,774 939,548 118,174 13–15) . . . ► X If you are following SOP 98-2. Joint Costs. Check ► Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (i) the aggregate amount of these joint costs 0 , (ii) the amount allocated to Program services \$

and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

				
w	/hat is the organization's primary exempt purpose? ▶ SE	EE ATTACHED		Program Service Expenses
AII of	I organizations must describe their exempt purpose achievement clients served, publications issued, etc. Discuss achievements t ganizations and 4947(a)(1) nonexempt charitable trusts must als	ts in a clear and concise manner. State the number that are not measurable (Section 501(c)(3) and (4)		(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
а	CIR IS A PUBLIC INTEREST LAW FIRM THAT LITIGAT CONSTITUTIONAL PRESCENDENTS IN THE AREAS OF GOVERNMENT. LAST YEAR CIR HAD AN ACTIVE DO THE DOCKET	OF CIVIL RIGHTS, FREE SPEECH, AND LIMITED DCKET CONSISTING OF THE CASES SHOWN ON	-	
	(Grants and allocations \$ 0) If this amount includes foreign grants, check here		939,548
b	_		- - - -	
	(Grants and allocations \$ 0) If this amount includes foreign grants, check here		0
С		•••••	- - - -	
	(Grants and allocations \$) If this amount includes foreign grants, check here	-	0
d	1		-	U
) If this amount includes foreign grants, check here	·	0
е	Other program services (attach schedule)	None - Control -		
_) If this amount includes foreign grants, check here	<u> </u>	0
f	f Total of Program Service Expenses (should equal line	e 44, column (B), Program services)		939 548

Form **990** (2007)

Pai	t IV	Balance Sheets (See the instructions.)	_						
	Note:	Where required, attached schedules and amounts with		·	(A)		(B)		
					Beginning of year	 	End of year		
	45	Cash—non-interest-bearing			300		300		
	46	Savings and temporary cash investments	· · · · · ·	1,891,237	46				
	47.0	Accounts receivable	47.	202		}			
			47a	292	0	470	202		
	6	Less ⁻ allowance for doubtful accounts	47b		0	47c	292		
	40.0	Pladaa raasiyahla	48a	0		1 [
		Pledges receivable							
	49	Grants receivable		95,000	48c	<u> </u>			
		Receivables from current and former officers, dire				-43 - -			
	30 a	key employees (attach schedule)			0	50a	0		
	h	Receivables from other disqualified persons (as defined		-		304			
<u>s</u>	"	4958(f)(1)) and persons described in section 4958(c)(3)				50b			
Assets	51 a	Other notes and loans receivable (attach	(D) (atte	ion schedule)		305			
As	" "	•	51a	n					
	h	•	51b	0	0	51c	0		
	52	Inventories for sale or use				52			
	53	Prepaid expenses and deferred charges .	7,895		31,755				
		Investments—publicly-traded securities	941,820		2,417,374				
	1	Investments—other securities (attach schedule).				54b	0		
		Investments—land, buildings, and	. –			340			
	33 a	equipment: basis	55a	o					
	۱ ہ	Less: accumulated depreciation (attach	33a						
	"		55b	o	0	55c	0		
	56	Investments—other (attach schedule)	$\overline{}$		0		0		
	I	Land, buildings, and equipment: basis	57a	194,653		30			
		Less: accumulated depreciation (attach	3,4	104,000					
			57b	182,930	19,624	57c	11,723		
	58	Other assets, including program-related investme	10,024	3,0	11,720				
	30	(describe ► DEPOSIT	19,166	58	19,729				
	59	Total assets (must equal line 74). Add lines 45 th	2,975,042		3,280,268				
	60	Accounts payable and accrued expenses			28,416		117,021		
	61	Grants payable			•	61			
	62	Deferred revenue				62			
S	63	Loans from officers, directors, trustees, and key e							
lities		schedule)			0	63	0		
Liabil	64 a	Tax-exempt bond liabilities (attach schedule) .			0		0		
Ë		Mortgages and other notes payable (attach sched			0	64b	0		
	65	Other liabilities (describe ► See attached state	ement) [79,341	65	103,329		
			•						
	66	Total liabilities. Add lines 60 through 65 .		· · · · · · · · · · · · · · · · · · ·	107,757	_66	220,350		
	Orga	nizations that follow SFAS 117, check here ▶	X an	d complete lines					
S.	ł	67 through 69 and lines 73 and 74.				_			
ည	67	Unrestricted			2,771,855	67	2,964,513		
or Fund Balances	68	Temporarily restricted			95,430	68	95,405		
ä	69	Permanently restricted		<u> </u>		69			
Ē	Orga	inizations that do not follow SFAS 117, check h	ere	▶ and					
耳		complete lines 70 through 74.							
ō	70	Capital stock, trust principal, or current funds .			70				
ets	71	Paid-in or capital surplus, or land, building, and e		71					
SS	72	Retained earnings, endowment, accumulated inco	ome, o	r other funds		72			
Net Assets	73	Total net assets or fund balances. Add lines 67	throug	gh 69 or lines		T	-		
Ž		70 through 72. (Column (A) must equal line 19 as	mn (B) must						
		equal line 21)			2,867,285	73	3,059,918		
	74	Total liabilities and net assets/fund balances.	Add lin	es 66 and 73.	2.975.042	74	3,280,268		

Form **990** (2007)

Part I	V-A Reconciliation of Revenue per instructions.)	Audited Financial St	tatements Wit	h Revenue per Reti	ırn (See the
а	Total revenue, gains, and other support pe	er audited financial state	ments		а	1,401,407
b	Amounts included on line a but not on Par	t I, line 12				
1			—	b1 6,555	<u> </u>	
2	Donated services and use of facilities		· · · · · · · · · · · · · · · ·	b2	1	
3	Recoveries of prior year grants			b3	4	
4	Other (specify)					
			L	b4 (4	
	· · · · · · · · · · · · · · · · · · ·				b	6,555
C	Subtract line b from line a				c_	1,394,852
d	Amounts included on Part I, line 12, but no		İ	ا مد		
1	Investment expenses not included on Part			<u>d1</u>	┨ ′	
2	Other (specify)			d2 (,l	
	Add lines d1 and d2		-		4 <u>d</u>	. 0
_	Total revenue (Part I, line 12). Add lines of				e	1,394,852
e Part I		z Audited Financial 9	Statemente Wi	th Evnenses ner P		
	Total expenses and losses per audited fin					1,208,774
a	Amounts included on line a but not on Par				a	1,200,174
b	Donated services and use of facilities .			ы		
1	Prior year adjustments reported on Part I,			b2	┨	
2	• •			b3	┨	
3	Losses reported on Part I, line 20		· · · · · · -	<u> </u>	┨	
4	Other (specify)		1	b4 (J	
	Add lines b1 through b4				ь	٠ ا
	Subtract line b from line a				C	1,208,774
c d	Amounts included on Part I, line 17, but no				-ٽ	1,200,774
1	Investment expenses not included on Part		1	d1	Ì	
2			-	<u> </u>	1	
				d2 (,l	
			·		d	i o
e	Total expenses (Part I, line 17). Add lines				e	1,208,774
Part V						
T art v	trustee, or key employee at any time					
	austoc, or key employee at any and	(B)	(C) Compensation			
	(A) Name and address	Title and average hours per		benefit plans & deferr	•	(E) Expense account and other allowances
		week devoted to position	enter -0)	compensation plans	3	and other allowances
Name	TERRENCE PELL str 1233 20th Street, N	<u>W</u> ⊤itle President				
Cıty	Washington ST DC ZIP 20036	Hr/WK 40	245,84	9 5	<u>0,167</u>	0
Name	MICHAEL ROSMA str 1233 20th Street, N	₩ Title Gen Coun.				
City	Washington ST DC ZIP 20036	Hr/WK 40	151,56	6 4	7,875	0
Name	LARRY ARNN str 1233 20th Street, N	W Title Director				
City	Washington ST DC ZIP 20036	Hr/WK 1	1	o <u></u>	0	0
	PROF. ROBERT F str 1233 20th Street, N	W Title Director				
	Washington ST DC zip 20036	Hr/WK 1	ıl	ol	0	l o
	JAMES MANN, Es str 1233 20th Street, N					
	Washington ST DC ZIP 20036	Hr/WK 1	4	ol	0	0
	JAMES PIERESOI str 1233 20th Street, N		<u> </u>	<u> </u>		
	Washington ST DC ZIP 20036	Hr/WK	.	o	0	o
			'			<u> </u>
	PROF JEREMY R str 1233 20th Street, N	 -	.	o	^	1
	Washington ST DC ZIP 20036	Hr/WK 1		 	0	0
	ARTHUR S PENN str 1233 20th Street, N	1	.]	ا	_	
	Washington ST DC ZIP 20036	Hr/WK 1	<u> </u>	0	0	0
Name		Title				
Cıty		Hr/WK				
Name	N/A Str	- Title				
City	ST ZIP	Hr/WK				

Part	V-A Current Officers, Directors, Tru		nlovees (continu	ed)		Yes	No
	Enter the total number of officers, directors, ar			ion business at board		163	NO
h	meetings		►	6			
b	employees listed in Schedule A, Part I, or high			=		~	
	contractors listed in Schedule A, Part II-A or II-	B, related to each other	er through family o	r business	,		
	relationships? If "Yes," attach a statement that				75b		X
С	Do any officers, directors, trustees, or key emp compensated employees listed in Schedule A,						
	independent contractors listed in Schedule A,					,,	
	organizations, whether tax exempt or taxable,	•	•	•			
	the definition of "related organization."			• • • • • • • • •	75c		Х
d	If "Yes," attach a statement that includes the ir Does the organization have a written conflict o				75d		X
Part						any foi	
	officer, director, trustee, or key employe			-	· ·	-	
	person below and enter the amount of c	ompensation or other l	benefits in the appr	ropriate column. See the ins	truction	ıs)	
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	(D) Contributions to employee benefit plans & deferred		Expens	
	(A) Name and address	(B) Loans and Advances	enter -0-)	compensation plans		nt and o	
Name							
City Name							
City							
Name	N/A str						
City	ST ZIP N/A Str		<u></u>				
City							
Name							
City							
Name	N/A						
Name						·	
City							
Name City							
Name					··		
Cıty							
	N/A <u>Str</u> ST ZIP						
City Part		ıons.)				Yes	No
76	Did the organization make a change in its activ		nducting activities?	If "Yes," attach a			
					76		_X_
77	Were any changes made in the organizing or g If "Yes," attach a conformed copy of the chang	·	out not reported to	the IRS?	77		<u> </u>
78 a	Did the organization have unrelated business of		or more during th	e vear covered by			
	this return?			•	78a		
b	If "Yes," has it filed a tax return on Form 990-1	•			78b	N/A	
79	Was there a liquidation, dissolution, terminatio	n, or substantial contra	action during the ye	ear? If "Yes," attach			
80 a	a statement	in the state of th	or nationwide ere	anization) through	79		_ <u>X_</u>
80 a	common membership, governing bodies, truste		_				
			•	•	80a		X
b	If "Yes," enter the name of the organization \blacktriangleright		<u></u>	· <u></u>			
	• • • • • • • • • • • • • • • • • • • •	and check whether		or nonexempt			ļ
	Enter direct and indirect political expenditures.			81a N/A			
b	Did the organization file Form 1120-POL for the	is year?	<u></u>		81b		X

Form 9	90 (2007)	CENTER FOR INDIVIDUAL RIGHTS 52-1600481			Page 7
Part	VI	Other Information (continued)		Yes	No
82 a	Did th	e organization receive donated services or the use of materials, equipment, or facilit	ties at no charge		
-		substantially less than fair rental value?			X
t		s," you may indicate the value of these items here. Do not include this amount			
		venue in Part I or as an expense in Part II.			
	(See ı	instructions in Part III.)	/A		
		e organization comply with the public inspection requirements for returns and exemp		X	
		e organization comply with the disclosure requirements relating to quid pro quo con-		X	
		e organization solicit any contributions or gifts that were not tax deductible?			X
ŀ		s," did the organization include with every solicitation an express statement that such		N//A	
		s were not tax deductible?			
85		(4), (5), or (6). Were substantially all dues nondeductible by members?			
r.		le organization make only in-house lobbying expenditures of \$2,000 or less? s" was answered to either 85a or 85b, do not complete 85c through 85h below unles		IN/A	
		ization received a waiver for proxy tax owed for the prior year.	ss trie		
		assessments, and similar amounts from members	/A		
		on 162(e) lobbying and political expenditures			}
ì		egate nondeductible amount of section 6033(e)(1)(A) dues notices	 		
f		ole amount of lobbying and political expenditures (line 85d less 85e) 85f N	/A		
		the organization elect to pay the section 6033(e) tax on the amount on line 85f? .		N/A	
		tion 6033(e)(1)(A) dues notices were sent, does the organization agree to add the ar			
	its rea	asonable estimate of dues allocable to nondeductible lobbying and political expenditu	ures for the		
		ing tax year?	<u>85</u> h	N/A	<u> </u>
86		(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a			
k		receipts, included on line 12, for public use of club facilities			
87)(12) orgs Enter: a Gross income from members or shareholders			
k		s income from other sources. (Do not net amounts due or paid to other			
		es against amounts due or received from them)			
88 8		y time during the year, did the organization own a 50% or greater interest in a taxable			
		ership, or an entity disregarded as separate from the organization under Regulations			X
		701-2 and 301.7701-3? If "Yes," complete Part IX		+	-
			► 88b		x
89 2		(3) organizations. Enter: Amount of tax imposed on the organization during the year			
		in 4911 ► ; section 4912 ► ; section 4955	>		
t)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess bel	nefit transaction		
		the year or did it become aware of an excess benefit transaction from a prior year?			
	a state	ement explaining each transaction	89b		Х
(: Amount of tax imposed on the organization managers or disqualified			
	•	ns during the year under sections 4912, 4955, and 4958 ▶ <u>N/A</u>			
		: Amount of tax on line 89c, above, reimbursed by the organization ► N/A	 		
6	_	ganizations At any time during the tax year, was the organization a party to a prohib		-	
		action?			X
	_	anizations. Did the organization acquire a direct or indirect interest in any applicable insurance supporting organizations and sponsoring organizations maintaining donor advised fun			
٤		orting organizations and sponsoring organizations maintaining donor advised fur- prting organization, or a fund maintained by a sponsoring organization, have excess l			
		r time during the year?	· · ·	N/A	
90 a		ne states with which a copy of this return is filed DC		1, 1477	
		per of employees employed in the pay period that includes March 12, 2007 (See			
		ctions.)	90b		5
91 a		ooks are in care of Name The Center	Telephone no. ► (202)83	3-8400)
	Locate	ed at ► 1233 20TH ST.NW, STE 300 City WASHINGTON ST DC	ZIP + 4 ▶ 20036		
t	At any	y time during the calendar year, did the organization have an interest in or a signatur		\[\sigma_{=}^{-1}\]	NI =
		a financial account in a foreign country (such as a bank account, securities account,	The state of the s	Yes	No
		int)?	<u>91b</u>		Х
		s," enter the name of the foreign country			
		ne instructions for exceptions and filing requirements for Form TD F 90-22.1, Report	of Foreign Bank		
	and F	inancial Accounts	1	1	

	CENTER FOR INDIV	IDUAL RIGHTS				32-1000461		
Part \	Other Information (continued)						Yes	No
С	At any time during the calendar year, did the o	organization mainta	ain an	office ou	tside of the Unit	ed States?)1c	X
	If "Yes," enter the name of the foreign country	•						
92	Section 4947(a)(1) nonexempt charitable trust	ts filing Form 990 i	n lieu d	of Form	1041 —Check h	nere		▶ [
	and enter the amount of tax-exempt interest re	eceived or accrued	l during	the tax	year	. ▶ 92 N/A		
Part \								
	Enter gross amounts unless otherwise	Unrelated busin			Excluded by sect	ion 512, 513, or 514	(E)
indica	-		ĭ				Relate	ed or
		(A) Business code		(B) mount	(C) Exclusion code	(D) Amount	exempt f	
93	Program service revenue	Business code	- "	- Iount	Exclusion code	7 THOUSE	Incol	
	ATTORNEY'S FEES	<u> </u>	-			 	 	97,739
			-				+	
C			-				-	
d					 	 	 	
e			_			 	 	
f	Medicare/Medicaid payments		-				 	
	Fees and contracts from government agencies				<u> </u>		 	
94	Membership dues and assessments					440.000	+	
95	Interest on savings and temporary cash investments		-		14	146,892	<u>-</u>	
96	Dividends and interest from securities		-				+	
97	Net rental income or (loss) from real estate	-, ,			 		+	
	debt-financed property .		-		46	60.000		
	not debt-financed property .		-		16	60,000	4	
98	Net rental income or (loss) from personal property .						+	
99	Other investment income .			_	10	220	,—	
100 101	Gain or (loss) from sales of assets other than inventory				18	-238	' 	
101	Net income or (loss) from special events							
	Gross profit or (loss) from sales of inventory						 	
103	Other revenue a	,					+	
b						 	+	
ب C			 				+	
d			 			 	+	
e 104	Subtotal (add columns (B), (D), and (E)) .		+			206,654	1 10	97,739
105	Total (add line 104, columns (B), (D), and (E))	L			. <u></u>	200,034		97,739 04,393
	Line 105 plus line 1e, Part I, should equal the a	Imount on line 12	Part I	•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part \					urnagae (Saa	the instruction	<u> </u>	
Line I	No. Explain how each activity for which income is of the organization's exempt purposes (other	•			•	itly to the accompli	shment	
						aid by the anne	ina sida	
<u>93a</u>	a Attorney fees are accepted by the Center v or when the amount is awarded by statute						-	
	or when the amount is awarded by statute	as Congress interi	ueu to	encoura	ge bringing cen	ain types of laws	uits.	
								
Part I	X Information Regarding Taxable St	theidiaries and	Diero	nardod	Entities (See	the instructions		
raiti	(A)		Disie	garueu	Littles (See	THE ITISTI DELICITORS	1	<u> </u>
	Name, address, and EIN of corporation,	(B) Percentage	of		(C)	(D)	(E)	
	partnership, or disregarded entity	ownership into		Natu	e of activities	Total income	End-of- asse	
			%			0	1	0
			// 0				 	0
			// 0					0
	· · · · · · · · · · · · · · · · · · ·							0
Part >	Information Regarding Transfers	Associated with			nefit Contrac		<u> </u>	_
								
	d the organization, during the year, receive any funds, dire	• •		•			=	X No
	id the organization, during the year, pay premiu		irectly,	on a per	sonal benefit co	ontract?	Yes [X No
Note:	If "Yes" to (b), file Form 8870 and Form 4720	(see instructions)		·				

Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. Name, address, of each controlled entity Properties Properti	Part 2	Information Regarding is a controlling organization		n Controlled Entities. Complete 512(b)(13).	e only if the o	rganıza	ation
(A) Name, address, of each controlled entity Totals Totals Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) Name, address, of each controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (B) (C) Did the reporting organization receive any transfers from a controlled entity. (B) (C) Description of transfer tra	106	Did the reporting organization ma	ke any transfers to a cont	rolled entity as defined in section 5	12(b)(13) of	Yes	No
Totals Totals Totals Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) Name, address, of each controlled entity Employer Identification Description of transfer a Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, its true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Please Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's STOKES & COMPANY P.C. Proceed the section of controlled entity as defined in section in the preparer is son at the preparer is		(A) Name, address, of each	(B) Employer Identification	(C) Description of			X fer
Totals Totals Totals Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) (B) (C) (D) (D) Amount of transfer Description of transfer Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Available, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief in the preparer is a preparer in the preparer is signature. Preparer's Signature of officer Signature of officer Signature of officer STOKES & COMPANY P.C. Fin	а						
Totals Totals Did the reporting organization receive any transfers from a controlled entity as defined in section \$12(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) Name, address, of each controlled entity Employer Identification Number Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalities, and annuities described in question 107 above? Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature Preparer's Signature Preparer's Signature Preparer's Signature Preparer's Signature Preparer's SIGNES & COMPANY P.C. In Preparer's STOKES & COMPANY P.C.	b						
Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) (B) (C) (D) Amount of transfer (D) Amount of transfer Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Preparer's Signature of officer Tercent T. Pent Preparer's Signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) STOKES & COMPANY P.C. In Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's STOKES & COMPANY P.C. In Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's SSN or PTIN (See Cen Inst. self-my name (or yours) Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature of officer Preparer's signature Pr	С						
Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity. (A) (B) (C) (D) Amount of transfer (D) Amount of transfer Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) Perparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name and title Preparer's Signature of officer Type or print name of yours STOKES & COMPANY P.C.		Totals					0
Name, address, of each controlled entity Name, address, of each controlled entity	107				on	Yes	No X
Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature of officer Type or print name and title Preparer's Signature Preparer's SSN or PTIN (See Gen Inst. employed proports as ITOKES & COMPANY P.C. Fins name (or yours proports) STOKES & COMPANY P.C. Fins name (or yours proports)		Name, address, of each	Employer Identification	Description of			
Totals Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature of officer Type or print name and title Preparer's Signature Preparer's STOKES & COMPANY P.C. Press Store Print (See Gen Inst. Self-self-self-self-self-self-self-self-s	а						
Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature Preparer's Signature Preparer's Signature Preparer's SIN or PTIN (See Cen Inst. Preparer's Signature Preparer's SIN or PTIN (See Cen Inst. Preparer's Signature Preparer's SIGNES & COMPANY P.C. FIN Preparer's SSN or PTIN (See Cen Inst. Preparer's SSN or PTIN (See Cen	b						
Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature Preparer's Signature Preparer's Signature Preparer's STOKES & COMPANY P.C. Pressure STOKES & COMPANY P.C. Pressure STOKES & COMPANY P.C. FIN. \$52-1190469	С						
Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Preparer's Signature Preparer's Signature Preparer's Signature Preparer's SIN or PTIN (See Gen Inst. self-employed proposed pro		Totals					
and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Please Sign Here Signature of officer Type or print name and title Preparer's Signature Preparer's Signature Preparer's SIGNES & COMPANY P.C. FIN. 52-1190469	108				nterest,	Yes	No X
Preparer's SSN or PTIN (See Gen Inst. Signature Firm's name (or yours STOKES & COMPANY P.C.	Sign	and belief, it is true, correct, and complete in the signature of officer Signature of officer	Declaration of preparer (other than	n officer) is based on all information of which p	reparer has any kn		
I ALL I '' IN OLUMEO MUUNIEANTEU IEN 502-LIMUANA		signature .	Hot CA	112/08 self- employed	Poolis	v33	-
address, and ZIP + 4 1201 15TH STREET, NW # 340, WASHINGTON, DC 20005-2 Phone no ≥ 202-293-9000	Jse Only	If self-employed).			▶ 202-293-	9000	(2007)

52-1600481

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	ı	-	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			
а	Sale, exchange, or leasing of property?	2a		Х
b	Lending of money or other extension of credit?	2b		Х
С	Furnishing of goods, services, or facilities?	2c		Х
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . Part V, Form 990	2d	х	
е	Transfer of any part of its income or assets?	2e		х
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a_		х
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		Х_
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		х
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a		x
b	Did the organization make any taxable distributions under section 4966?	4b		
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year		_	
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	-0-		
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year	-0-		

Part I	V Reason for Non-Private	Foundation S	tatus (See pages 4 thre	ough 8 of the	instructions.)			
I certify	that the organization is not a private	foundation becaus	e it is (Please check only O	NE applicable bo	ox.)			
5 [A church, convention of churches	s, or association of	f churches Section 170(b)(1)(A)(ı)				
6 [A school Section 170(b)(1)(A)(ii)	(Also complete P	Part V)					
7 [A hospital or a cooperative hospi	tal service organiz	ation Section 170(b)(1)(A)(ii	н)				
8 [A federal, state, or local government	ent or governmen	tal unit Section 170(b)(1)(A)	(v)				
9 [A medical research organization and state	•	inction with a hospital Secti		(III) Enter the ho	ospital's name, city,		
10 [An organization operated for the (Also complete the Support Sch	=		rated by a gover	nmental unit. Sed	ction 170(b)(1)(A)(iv)		
11 a [1 a X An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)							
11 в [A community trust Section 170(b	o)(1)(A)(vi) (Also c	complete the Support Scheo	dule in Part IV-A)			
12 [13 [receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)							
_	requirements of section 509(a)(3)			porting organiza				
	Provide the following inf	ormation about	the supported organiz	ations. (See p	age 8 of the ins	structions.)		
Name((a) (s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	ls the su organization the sup organiz governing d	ipported on listed in porting cation's	(e) Amount of support		
				Yes	No			
						0		
					<u> </u>	0		
						0		
-				· · ·		0		
						0		
Total .	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		· · · ·	▶	0		
14 [An organization organized and op	perated to test for p	oublic safety Section 509(a)	(4) (See page 8	of the instruction	ns)		

	art IV-A Support Schedule		•					_
	ote: You may use the worksheet i alendar year (or fiscal year begi		(a) 2006	(b) 2005	(c) 2004	(d) 2		(e) Total
15			(4) 2000	(3) 2333	(0) 200 .	<u> </u>	+	(6) 10(4)
	not include unusual grants. See li		1,180,150	1,143,311	1,535,756	1,1	77,645	5,036,862
16								0
17		merchandise						
	sold or services performed, or furi	nishing of						
	facilities in any activity that is rela	ted to the						
	organization's charitable, etc., pur	pose	110,218		352,393		35,000	497,611
18	Gross income from interest, divide	ends,					1	
	amounts received from payments							
	loans (section 512(a)(5)), rents, re	· •					1	
	income from similar sources, and							
	business taxable income (less sec							
	taxes) from businesses acquired to organization after June 30, 1975	by the	181,637	120,915	82,356		46,832	431,740
19			101,037	120,915	62,336	•	40,032	431,740
13	activities not included in line 18	;55						0
20		ızatıon's						
	benefit and either paid to it or exp							
	its behalf .							0
21	The value of services or facilities	furnished to						
	the organization by a government	al unit						
	without charge. Do not include the							
	services or facilities generally furn	iished to the						
	public without charge							0
22								
	include gain or (loss) from sale of	capital assets	423	1,853			250	2,526
23		· ·	1,472,428	1,266,079	1,970,505		59,727	5,968,739
24			1,362,210	1,266,079	1,618,112		24,727	5,471,128
25	Enter 1% of line 23		14,724	12,661	19,705	•	12,597	
26	Organizations described on line	es 10 or 11:	a Enter 2% of a	amount in column	(e), line 24	. ▶	26a	109,423
	b Prepare a list for your records to s							
	governmental unit or publicly supp						-	
	amount shown in line 26a Do not	-		the total of all the	se excess amoun	is 🕨	26b	2,065,770
	c Total support for section 509(a)(1)						26c	5,471,128
	d Add Amounts from column (e) for	r lines 18 22	<u>431,740</u> 19		70			2 500 026
	e Public support (line 26c minus line		<u>2,526</u> 26	b 2,065,7	<u>70</u>		26d 26e	2,500,036 2,971,092
	f Public support (line 200 miles line for Public support percentage (line		ivided hy line 26c	: (denominator))	•		26f	54 30%
27			•		17 that ware reco	und from		
21	prepare a list for your records to s		iounts included in l					
	file this list with your return. En			•	ou nom, ouon an	oquamou	pordon	50 1101
	(2006)			•		(2003)		
	b For any amount included in line 17						light for ye	······································
	to show the name of, and amount		•					
	\$5,000 (Include in the list organiz							
	After computing the difference bet		ceived and the lar	ger amount descr	ibed in (1) or (2),	enter the	sum of th	ese
	differences (the excess amounts)	for each year.						
	(2006)	(2005)		(2004)		(2003)		
	c Add Amounts from column (e) for		16				ا ا	•
	17		21		_ · ·		27c	0
	d Add Line 27a total		line 27b total		<u> </u>	. 🏲	27d	0
	e Public support (line 27c total minu	•	from her 20 and a	mn (a)			27e	0
	f Total support for section 509(a)(2)			• •	► 27f		270	0 00%
	g Public support percentage (lineh Investment income percentage				denominator\\		27g 27h	0.00%
						0 2003 th		
28	a list for your records to show, for							
	the nature of the grant Do not file						,	

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its	29		
	brochures, catalogues, and other written communications with the public dealing with student admissions,		ļ	
24	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that			
	makes the policy known to all parts of the general community it serves?	31	ļ	 -
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	32b		ļ
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges? .	33a		
b	Admissions policies?	33b	:	
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e	_	
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		, ,		
24.0	Does the organization receive any financial aid or assistance from a governmental agency?	240		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

		INDIVIDUAL NIC		32-10		
Pa	rt VI-A Lobbying Expenditures by Electing (To be completed ONLY by an eligible)				ctions.)	
Chec	ck >a				ited control" provi	sions apply
	Limits on Lobbying I	Expenditures	used)		(a) Affiliated group totals	(b) To be completed for all electing
	(The term "expenditures" means a			1 20		organizations
36	Total lobbying expenditures to influence public opinion (g			. 36		
37	Total lobbying expenditures to influence a legislative bod			37	0	0
38	Total lobbying expenditures (add lines 36 and 37)			. 38		
39	Other exempt purpose expenditures			40	0	0
40	Total exempt purpose expenditures (add lines 38 and 39	•	•	_40		<u> </u>
41	Lobbying nontaxable amount Enter the amount from the If the amount on line 40 is— The lob	bying nontaxable	amount is—		<	
		the amount on line			•	
	•		excess over \$500,000			
		•	excess over \$1,000,00			
			cess over \$1,500,000			
	Over \$17,000,000 \$1,000,	•				
42	Grassroots nontaxable amount (enter 25% of line 41)			42	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more t	than line 36 .		. 43	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more t	than line 38 .		44	0	0
	Caution: If there is an amount on either line 43 or line 44	· · · · · · · · · · · · · · · · · · ·				
		-	nder Section 501	• •		
	(Some organizations that made a section				lumns below	
	See the instructions for	lines 45 through 50	on page 13 of the ins	tructions)		
		Lobb	ying Expenditures	During 4-Ye	ar Averaging F	eriod
	Calendar year (or	(a)	(b)	(c)	(d)	(e)
	fiscal year beginning in)	2007	2006	2005	2004	Total
45	Lobbying nontaxable amount .					0
46	Lobbying ceiling amount (150% of line 45(e))					0
47	Total lobbying expenditures .					0
48	Grassroots nontaxable amount					o
	Out a state of the			~~		
49	Grassroots ceiling amount (150% of line 48(e))	-				0
50	Grassroots lobbying expenditures					0
Pa	rt VI-B Lobbying Activity by Nonelecting (For reporting only by organizations t			200 paga 14	of the instruct	tions \
	(For reporting only by organizations t	nat did not com	piete Fait VI-A) (C	bee page 14	or the mande	10113. <i>)</i>
	ng the year, did the organization attempt to influence nation			/	Yes No	Amount
atten	npt to influence public opinion on a legislative matter or ref	erendum, through t	he use of		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
а	Volunteers			•	X X	
b	Paid staff or management (Include compensation in expe	enses reported on I	nes c through h.)		X	
C	Media advertisements	• •			$\frac{1}{x}$	
d	Mailings to members, legislators, or the public			•	$\frac{1}{x}$. — .
e	Publications, or published or broadcast statements					
f	Grants to other organizations for lobbying purposes Direct contact with legislators, their staffs, government of		· · · · · · · · · · · · · · · · · · ·	•	$\frac{1}{x}$	<u> </u>
g h	Rallies, demonstrations, seminars, conventions, speeche	=	·			
i	Total lobbying expenditures (Add lines c through h.)				-	0
•	If "Yes" to any of the above, also attach a statement giving	ng a detailed descri	ption of the lobbying a	ctivities.	L	

_	VII	•	-	sfers To and Transaction age 14 of the instructions.	s and Relationships With		ble	ra	age 1	
51		· • •			ring with any other organization de 527, relating to political organization		on .			
а	a Transfers from the reporting organization to a noncharitable exempt organization of									
	(i) Cash								Χ_	
	(ii) Other assets								Χ_	
b	Other	transactions								
	(i) Sales or exchanges of assets with a noncharitable exempt organization								Х	
	(ii)	Purchases of assets t	from a noncharital	ble exempt organization .		<u>b</u>	(ii)		_X	
	(iii) Rental of facilities, equipment, or other assets								Х	
		Reimbursement arran	•	• • •			(iv)		Χ_	
		Loans or loan guarant			•		(v)		X	
				p or fundraising solicitations .			(vi)		<u>X</u>	
С				other assets, or paid employees	s . Column (b) should always show th		С	L	Χ	
	of the in any (a)	goods, other assets, transaction or sharing	or services given l g arrangement, sh	by the reporting organization If now in column (d) the value of the (c)	the organization received less that e goods, other assets, or services (c	n fair market va s received. I)	lue			
Lin	e no	Amount involved	Name of non-	charitable exempt organization	Description of transfers, transact	uons, and snaming a	arrang	ements	<u> </u>	
				<u> </u>						
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			-				-			
				<u> </u>		.				
		<u> </u>		<u> </u>						
										
52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									No	
(a) Name of organization			1	(b) Type of organization	Description o					
							_			
				<u> </u>	· · · · · · · · · · · · · · · · · · ·					
									—	
		<u>. </u>								
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PART I, LINE 8 - SALE OF ASSETS OTHER THAN INVENTORY

	<u>8a - G</u>	<u>8a - GROSS</u>		<u>8b - COST</u>		8c - GAINS/LOSS		
CORPORATE AND GOVERNMENT BONDS	*,**-	100,000	\$	100,000	\$	-		
CORPORATE STOCKS CERTIFICATE OF DEPOSITS		9,685		9,923 941,000		(238)		
CERTIFICATE OF DEPOSITS	\$	941,000 1,050,685	\$	1,050,923	\$	(238)		

PART I, LINE 20 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAIN ON INVESTMENTS \$ 6,555 \$ 6,555

PART II, LINE 42 - DEPRECATION PART IV, LINES 57a & b - LAND, BUILDINGS, EQUIPMENT & SOFTWARE/ACCUMULATED DEPRECIATION

DESCRIPTION	COST		DEPRECIATION		ACCUMULATED DEPRECIATION		BOOK <u>VALUE</u>		
FURNITURE, EQUIPMENT AND SOFTWARE LEASEHOLD IMPROVEMENT	\$	170,670 23,983	\$	7,901	\$	158,947 23.983	\$	11,723	
	\$	194,653	\$	7,901	\$	182,930	\$	11,723	

DEPRECIATION IS PROVIDED ON A STRAIGHT-LINE BASIS OVER THE ESTIMATED USEFUL LIVES OF THE ASSETS

PART II, LINE 43 - OTHER EXPENSES

				Program	Ge	eneral and		
		<u>Total</u>		Services	<u>Adr</u>	ninistrative	Fur	idraising
BANK CHARGES	\$	2,049	\$	-	\$	2,049	\$	-
DUES AND SUBSCRIPTIONS		10,447		5,798		669		3,980
ENTERTAINMENT		2,810		2,271		539		-
INSURANCE		20,859		14,219		6,640		-
PARKING		4,394		-		4,394		-
PROFESSIONAL SERVICE		36,612		19,246		8,843		8,523
RESEARCH		5,799		5,799		<u> </u>		<u> </u>
TOTAL EXPENSES BEFORE ALLOCATION OF INDIRECT EXPENSES		82,970		47,333		23,134		12,503
ALLOCATION OF INDIRECT EXPENSES		-		384,844		(439,212)		54,368
TOTAL OTHER EXPENSES	\$	82,970	_\$	432,177	\$	(416,078)		66,871